	-Effe	ctive Oct	ober 1, 2		iiun hec	ORE	,	.0	775	5581	· · · .	
CLAIMS AS FILED - PART ((Column 1) (Column 2)							SMALL ENTITY TYPE			OTHER THAN		
.TOTAL CLAIM	7					RATI						
FOR	NUMB	NUMBER FILED		NUMBER EXTRA		BASIC		<u></u>	RAT			
TOTAL CHARGEABLE CLAIMS		12	7 minus 20s		. 0		-	7=		~	-	
INDEPENDENT CLAIMS		+	. 3 .minus 3 =		. 0		X\$ 9.		l°	A .X\$18	-	
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* If the difference	e in cohima 1 k	loop then	2000 0010			!	+135-			H +510	a' —	
		less than zero, enter °C in column 2 MENDED - PART II				TOTAL		Пó	A TOTA	7/07		
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2	. CLAURS	,	FROR	EST	(Column 3)) r		ADD			LENTITY	
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PRST PRESE	NTATION OF MA	LTIPLE DE	PENDENT C	MIAL		L	K40-		OR	X80-		
If this entity in column 1 is less than the entity in column 2, write "I" in column 3.							135-		OR	+270=		
THE PERSON NAMED IN	If the Trightest Number Provincely Paid For Bit Tries SPACE is test than 5. Action '20." If the Trightest Number Provincely Paid For IN Tries SPACE is test than 5. Action '20." All the Trightest Number Provincely Paid For IN Tries SPACE is test than 3. order '2."								OR	YOTAL ADDIT, FEE		
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Application or Docket Number